FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	'	(See instruction		N					0.					
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Exar	nple: If typy the lines	ing, type		12F	E4M		ffice use o	only			
ı Genesee & Wy	yoming Inc. PAC													. 1
	1 1 1 1 1 1 1 1 1						11							Щ,
	. 3601	Concord Road												Щ
ADDRESS (number and	street)						1 1	1 1					1	لـــ
X (Check if addr	ress 2nd	Floor		ш		ш	ш	1 1				ш		Ш
is changed)	York			للللا	لىب		L PA		Ш	174	102	- [_		Ш
			CITY			;	STAT	Ε <u></u>		Z	IP COI	DE 📥		
COMMITTEE'S E-MA														
jvest@gwii.co	,,,, 			Щ								—		Щ.
			Ш	Щ			ш							Щ
COMMITTEE'S WEB	PAGE ADDRESS (U	RL)												
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							1 1	1 1		11	11			
COMMITTEE'S FAX N 7177711775	NUMBER													
2. DATE M.	7 D D / Y	2008												
3. FEC IDENTIFICA	ATION NUMBER	(C 00	289058										
4. IS THIS STATEM	MENT NEW	V (N) OR	X	AMEN	NDED (A)									
I certify that I have exam	ined this Statement and	to the best of my know	vledge an	d belief it is	true, correc	ct and	compl	ete						
Type or Print Name of	Treasurer	Jerry Vest												
Signature of Treasurer	r Electronically File	d by Jerry Vest				С	ate	м 1	1 /	D 2	6 /	YYY	2 0 0) 8 [°]
NOTE: Submission of fa		nplete information may								of 2 U.S	S.C. S4	37g.		
Office Use Only				For further Federal Ele Toll Free 80	ction Com 00-424-95	missic					FOI			

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5.		COMMITTEE (Check One) Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
	Name of Candidate		
	Candidate Party Affilia	tion Office House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	Party Com		
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political Ad	ction Committee (PAC):	
	(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		X Corporation Corporation w/o Capital Stock La	bor Organization
		Membership Organization Trade Association C	ooperative
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fund	raising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Cor	nmittees Participating in Joint Fundraiser	
		1. FEC ID number C	
		2 FEC ID number C	
		3. FEC ID number	
		4. FEC ID number C	
		5 FEC ID number C	

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Write or Type Committee Name			
Genesee & Wyoming Inc	. PAC		
6. Name of Any Connected Org	anization, Affiliated Committee, Leadership PAC	Sponsor or Joint Fundrais	ing Representative
Genesee & Wyoming, Inc	<u> </u>		
Mailing Address	66 Field Point Road		
	Greenwich	L GT L	06830 _
	CITY	STATE 🛕	ZIP CODE
Relationship:			
X Connected Organization	Affiliated Committee Leadership	o PAC Sponsor Joint	Fundraising Representative
Custodian of Records: Idea possession of Committee I Beth Sa Full Name Beth Sa		otional), and position of th	e person in
Mailing Address	Holland & Knight LLP		
	2099 Pennsylvania Avenue N.	.W., Sui	
	Washington	DC	20006
Title or Position ♥ Custodian	CITY A of Records Tel	STATE lephone number 202	ZIP CODE 4 - 663 - 7240
	and address (phone number optional) of th designated agent (e.g., assistant treasurer).	e treasurer of the commit	tee; and the
Mailing Address	PO Box 38652		
	Pittsburgh	<u>PA</u>	15238
Title or Position ♥	CITY A	STATE ▲	ZIP CODE A
Treasurer		elephone number 412	_ 963 _ 1805

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Full Name of Designated Agent	Kim Smith		
Mailing Address	3601 Concord Road		
	2nd Floor		
	York	PA	17402 –
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
Assista	nt Treasurer	Telephone number	
Banks or Other Depositors safety deposit boxes or management of Bank, Depository	aintains funds.	nich the committee deposits funds, h	olds accounts, rents
safety deposit boxes or ma Name of Bank, Depository	aintains funds.	nich the committee deposits funds, h	olds accounts, rents
safety deposit boxes or ma Name of Bank, Depository	aintains funds. /, etc. achovia	nich the committee deposits funds, h	olds accounts, rents
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Safety deposit boxes or ma Name of Bank, Depository Wa Mailing Address Name of Bank, Depository	aintains funds. /, etc. achovia 12 East Market St. PA 6601 York CITY /, etc.	PA STATE △	17401 _ ZIP CODE